JACQMAR, INC.
10965 53rd Ave N
Plymouth, MN, 55442

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PTO/SB/17 (03-12)

Approved for use through 01/31/2014. OM8 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE tion Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if known Application Number FEE TRANSMITTAL Filing Date First Named Inventor **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit TOTAL AMOUNT OF PAYMENT Practitioner Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to (check all that apply): Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) Credit any overpayment of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Fee (\$) Small Entity Fee (\$) Small Entity Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Small Entity Fee (\$) 125 310 Utility 380 190 620 250 Design 250 125 120 160 80 Plant 250 125 380 190 200 100 620 310 750 375 Reissue 380 190 Provisional 125 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 30 125 250 Each independent claim over 3 (including Reissues) 225 Multiple dependent claims **Total Claims** Fee Paid (\$) -20 or HP = **Multiple Dependent Claims** HP = highest number of total claims paid for, if greater than 20. Fee (\$) Fee Paid (\$) Indep. Claims **Extra Claims** Fee Paid (\$) -3 or HP = HP = highest number of independent claims paid for, if greater than 3. If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$310 (\$155 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof **Total Sheets** <u>Fee (\$)</u> Fee Paid (\$) __ (round up to a whole number) 4. OTHER FEE(S) Petition \$1300 Surchage \$700 MiFee 1435 Fees Paid (\$) Non-English specification, \$130 fee (no small entity discount) Non-electronic filing fee under 37 CFR 1.16(t) for a utility application, \$400 fee (\$200 small entity) Other (e.g., late filing surcharge): SUBMITTED BY Registration No. Telephone Signature (Attorney/Agent)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| FEE TRANSMITTAL | | | | Application Nur | Application Number | | 0 |
| | | | | Filing Date | Filing Date | | 19 |
| | | | | First Named Inv | entor | <u> </u> | |
| r. | | | | Examiner Name | | | roughe |
| Applicant clair | tity status. See 37 CFR 1 | 27 | Art Unit | USP | 0 6131010 | 0 | |
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| Deposit Accou | nt Deposit | Account Number: | | Denosit Acc | Ount Name | | |
| Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to (check all that apply): | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | |
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| Charge any additional fee(s) or underpayment of fee(s) Credit any overpayment of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | |
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| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SE | EARCH, AND | EXAMINATION FEES | | | | | |
| | | FILING FEES | SI | EARCH FEES | EXA | AMINATION FEES | |
| Application Type Utility | <u>Fee (\$)</u> 380 | Small Entity Fee (\$) 190 | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid (\$) |
| Design | 250 | 125 | 620 120 | 310 60 | 250 160 | 125 | |
| Plant | 250 | 125 | 380 | 190 | 160 200 | 80 100 | |
| Reissue | 380 | 190 | 620 | 310 | 750 | 375 | |
| Provisional | 250 | 125 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM F | EES | | | | | | |
| Fee Description | transfer to the | | | | | Fee (\$) Sm | all Entity Fee (\$) |
| Each claim over 20 (Each independent c | including K laim over 3 | 60 | 30 | | | | |
| Multiple dependent | claims | (meidding neissues) | | | | 250 450 | 125 |
| Total Claims | | Extra Claims | Fee | (\$) <u>Fee Pa</u> | id (\$) | 450 | 225 |
| HP = highest numbe | -20 or HP | | × | = | | Multiple Depen | dent Claims |
| Indep. Claims | = highest number of total claims paid for, if greater than 20. ep. Claims Fee (\$) | | | (\$) 500 Bo | Fee Paid (\$) | | Fee Paid (\$) |
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| | | ndent claims paid for, if | greater than | 3. | | | |
| 3. APPLICATION SIZ | | | | | | | |
| If the specification a | nd drawing | s exceed 100 sheets of p | aper (exclud | ling electronically filed s | equence or | computer listings under | 37 CFR 1.52(e)), |
| 37 CFR 1.16(s). | ree due is \$. | 310 (\$155 for small entit | ty) for each a | idditional 50 sheets or f | raction ther | eof. See 35 U.S.C. 41(a)(| 1)(G) and |
| Total Sheets | Extra Sh | neets Number o | of each addit | tional 50 or fraction the | reof | <u>Fee (\$)</u> F | |
| - 100 = | 2 | / 50 = | (round us | to a whole number) | | | ee Paid (\$) |
| 4. OTHER FEE(S) Petition \$1300 Surchage \$700 MiFee 1435 Fees Paid (5) | | | | | | | |
| Non-English specification, \$130 fee (no small entity discount) | | | | | | | |
| Non-electronic filing fee under 37 CFR 1.16(t) for a utility application, \$400 fee (\$200 small entity) | | | | | | | |
| Other (e.g., late filing surcharge): | | | | | | | |
| SUBMITTED BY | | | | | | | |
| Signature | Ka | Helen P | Jem | Registration No. (Attorney/Agent) | 188 | Telephone 5-1 | 659 9819 |
| Name (Print/Type) | د کا_ | thleen P. | Tern |), ———————————————————————————————————— | | Date I | 12.3. |
| his collection of inform | ation is requi | red by 37 CFR 1.136. The in | formation is re | Juizad to absolu | | | WAY MILL |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandría, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandría, VA 22313-1450.

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PTO/SB/21 (07-09) Approved for use through 07/31/2012. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE and at the sperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 09/227,400 Filing Date TRANSMITTAL January 9, 1999 *FORM First Named Inventor David A. Browdie Art Unit **Examiner Name** for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a **Proprietary Information** After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer **Extension of Time Request** below): Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) el & copy thereof ther of June 13, 2012 Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Signature Printed name Kathleen R. Terry Date Reg. No. 31884 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature

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Date